

CLAIMS ONLY								Application Number		Filing Date	
								Applicant(s)			
								* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1	/						51				
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48							98				
49							99				
50							100				
Total Indep	1						Total Indep				
Total Depend	3						Total Depend				
Total Claims	4						Total Claims				

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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May be used for additional claims or amendments						
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Total Indep						
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